CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received Official Use Only

AH 7: 12 Please type or print in ink. NAME OF FILER (LAST) (FIRST) Hiber John Е 1. Office, Agency, or Court Agency Name State Controller's Office Division, Board, Department, District, if applicable Your Position **Executive Office** Chief Operating Officer ▶ If filing for multiple positions, list below or on an attachment. 2. Jurisdiction of Office (Check at least one box) ✓ State Judge or Court Commissioner (Statewide Jurisdiction) Multi-County _____ City of _____ Other _____ 3. Type of Statement (Check at least one box) Leaving Office: Date Left 01 / 10 / Annual: The period covered is January 1, 2012, through December 31, 2012, (Check one) -or-The period covered is _______, through The period covered is January 1, 2012, through the date of leaving office. December 31, 2012. O The period covered is ______, through Assuming Office: Date assumed ____/___/ the date of leaving office. Candidate: Election year _____ and office sought, if different than Part 1: ___ 4. Schedule Summary ► Total number of pages including this cover page: $\frac{3}{2}$ Check applicable schedules or "None." Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B • Real Property – schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STATE STREET CITY ZIP CODE (Business or Agency Address Recommended - Public Document) 300 Capitol Mall Sacramento CA 95814 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL) (916) 552-8080 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct, Date Signed 01/10/2013 Signature . latement with your filing official.} (month, day, year)

STATEMENT OF ECONOMIC INTERESTS ACE.

Date Received
Official Use Only

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Please type or print in ink.	,		29/3/11/11		
NAME OF FILER (I	LAST)	(FIRST		(MIDDLE)	2000
Hiber	را	lohn		E	
1. Office, Agency, or Court					*************
Agency Name					
State Controller's Office				:	
Division, Board, Department, District, if a	pplicable	Your F	Position		
Executive Office		Chie	of Operating Officer		
► If filing for multiple positions, list below	w or on an attachment.			•	
Agency: See Attached		D			
Agency:		Positi	on:		
2. Jurisdiction of Office (Check a	t least one box)				
✓ State		☐ Judg	e or Court Commissioner	(Statewide Jurisdiction)	
Multi-County			•		
City of		_	•		
City of					
3. Type of Statement (Check at lea	st one box)				
Annual: The period covered is Janu	ary 1, 2012, through	☑ Lea	ving Office: Date Left	12 , 21 , 2012	
December 31, 2012. -or-		(Chi	eck one)		
The period covered is		through O	The period covered is Janue eaving office.	uary 1, 2012, through the d	ate of
Assuming Office: Date assumed _			The period covered is he date of leaving office.	, th	rough
Candidate: Election year	and office	sought, if different than l	Part 1:		
4. Schedule Summary					
Check applicable schedules or "None."	,	► Total number of	pages including this	s cover page: 4	
Schedule A-1 - Investments - sched					
Schedule A-2 - Investments - schedule			C - Income, Loans, & Bus D - Income – Gifts – sche	iness Positions – schedule	attached
Schedule B - Real Property - schedu				el Payments – schedule att	ached
, ,	-or-	<u></u>			201100
	-	able interests on any sch	nedule		
5. Verification					
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public	Dacument	CITY	STATE	ZIP CODE	
300 Capitol Mall, Suite 1850	•	amento	CA	95814	
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS			
(916) 552-8080					
I have used all reasonable diligence in pre- herein and in any attached schedules is tr				knowledge the information o	ontained
I certify under penalty of perjury under		-		ct.	\bigcirc
Date Signed 01/09/2012		2:	- 120		_
(month, day, year)		Signature	(File the originally signed state	ement with your filing official.)	

California Form 700

Statement of Economic Interests

Attachment I

John Hiber

- 1. California Public Employees' Retirement System
- 2. California Teachers' Retirement System
- 3. California Educational Facilities Authority
- 4. California Health Facilities Financing Authority
- 5. California State Public Works Board
- 6. Pooled Money Investment Board
- 7. General Obligation Bond Finance Committees

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Hiber, John

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
CAT	AUNF
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Qver \$1,000,000
NATURE OF INVESTMENT ✓ Stock Other(Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	12 / 18 / 12 / 12 ACQUIRED / / 12
NAME OF BUSINESS ENTITY SLB	NAME OF BUSINESS ENTITY IACAF
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT ☑ Stock □ Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	06 , 01 , 12
► NAME OF BUSINESS ENTITY DMND	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock	NATURE OF INVESTMENT Stock Other
(Describe) Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
12 , 03 , 12 , 12 ACQUIRED DISPOSED	
Comments:	

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Hiber, John

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Mary K Hiber Revocable Trust	
Name 4051 Fair Oaks Blvd	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
☑ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 / / 12	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 \cdot \$499 \qquad \text{\$10,001 - \$100,000} \qquad \text{\$500 - \$1,000} \qquad \text{\$0 \cdot \$1,000} \qquad \text{\$0 \cdot \$1,000} \qquad \text{\$0 \cdot \$1,000}	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) // None	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None
(MZ) NOTO	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
▶ 4, INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entily, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 · \$10,000 \$10,001 · \$100,000 \$100,001 · \$1,000,000 Over \$1,000,000 ACQUIRED DISPOSED
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:____

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM / () (
FAIR POLITICAL PRACTICES COMMISSION	
Name	
Hiber, John	

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
CAT	AUNF
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE ☐ \$2,000 - \$10,000 ☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000 NATURE OF INVESTMENT ✓ Stock ☐ Other	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other
Describe (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Sched	(Describe) Partnership Income Received of \$0 - \$499
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE: 12 , 18 , 12 , 12
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY SLB GENERAL DESCRIPTION OF BUSINESS ACTIVITY	NAME OF BUSINESS ENTITY IACAF GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE [2] \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Scheduler)	NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE: 06 , 01 , 12
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
DMND GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Scheduler)	NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
12 , 03 , 12 , 12 ACQUIRED DISPOSED	/
Comments:	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA	FORN		
FAIR POLITICAL PE		SSION	
Name			
Hiber, John		 	

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Mary K Hiber Revocable Trust	
Name	Name
4051 Fair Oaks Blvd Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
☑ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
NATURE OF INVESTMENT Partnership Sole Proprietorship	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA
SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
✓ None	None
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box: INVESTMENT REAL PROPERTY	Check one box: INVESTMENT REAL PROPERTY
L. HVESTMENT	
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Reaf Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / 12	FAIR MARKET VALUE F APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:_